

**U.S. Department of Justice  
United States Marshals Service**

## **PROCESS RECEIPT AND RETURN**

*See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.*

PLAINTIFF	JIMMIE LEWIS	COURT CASE NUMBER 06-778 GMS
DEFENDANT	TOMAS L. CARROL, ET AL	TYPE OF PROCESS O/C
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <b>DEPUTY ATTORNEY GENERAL</b>	
AT	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) <b>820 N PRENCH ST, WILMINGTON, DEL 19801 774 FC</b>	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:		Number of process to be served with this Form - 285 <b>1</b>
<input checked="" type="checkbox"/> JIMMIE LEWIS, SB#506622 DCC		Number of parties to be served in this case <b>0</b>
<input type="checkbox"/> 1181 PADDOCK RD, SMYRNA, DEL 19971		Check for service on U.S.A. <b>15 JUL 2007</b>

**SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE** *(Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):*

# INFORMA PAUPERIS

Signature of Attorney or other Originator requesting service on behalf of:  
Dannie Lewis

<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
<input type="checkbox"/> DEFENDANT	<u>N/A</u>	<u>4/27/07</u>

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated.  
*(Sign only first USM 285 if more than one USM 285 is submitted)*

Total Process	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk <i>[Signature]</i>	Date <i>7-18-07</i>
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I hereby certify and return that I  have personally served,  have legal evidence of service,  have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above) <b>Keith Brady, Asst. St. Solicitor</b>	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
Address (complete only if different than shown above)	Date of Service      Time      am <b>7/18/07</b> <b>pm</b>
Signature of U.S. Marshal or Deputy <b>John [Signature]</b>	

Service Fee	Total Mileage Charges <i>(including endeavors)</i>	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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**REMARKS:**